PTO/\$8/06 (08-03)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of info metion unless it displays a valid DAM control number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Catumn 2) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) s385.0 170.0 OR TOTAL CLAIMS x sg.u (37 CFR 1.16(c)) x 5/8.0° mbus 20 = OR INDEPENDENT CLAIMS × 430. x \$ 86.0. minus 3 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) . 290.2 OR " If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) OR (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING AFTER NUMBER PREVIOUSLY PRESENT RATE ADD1 RATE AMENDMENT EXTRA TIONAL PAID FOR ENDWENT FEE Total OF OFR 1,19(d) Minus ., 9⁻ x s/8 OR Endependent (37 CFR 1.16(b)) Minus OR ·:H5. +,290. FIRST PRESENTATION OF MAILTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR CHEED IN AMOT NATED 1/8/04. TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Cotumn 1) (Cotumn 2) (Column 3) CLAIMS HIGHEST œ REMAINING PRESENT NUMBER RATE RATE ADDI-ADDI-PREVIOUSLY PAID FOR AFTER EXTRA TIONAL TIONAL AMENBOOFNT FEE Total (37 CFR 1,16(c)) **IENOM** × 18 -OR Independent (32 CFR 1,16(b)) #3 x : 86 . OR ₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (1)7 CFR 1, 16(d)) + 290 ne TOTAL ADD'L FEE OR ADD'L FEE (Column 2) otumn 1) (Catumn 3) CLAUMS HIGHEST REMAINING NUMBER PRESENT RATE ADDI ADDL AFTER PREVIOUSLY EXTRA TIONAL TIONAL AMENDYENT PADFOR FEE AMENDM Total (D OFR 1,15(cg OR Independent (37 CFR 1.18(kg) x . 43. × 28/0. OR ,290. FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 OFR 1.16(d)) OR TOTAL ADD' FEE ADO'L FEE OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 20, enter "2".
 If the Trighest Number Proviously Paid For IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" to THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This cataction of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments in the appropriate pour require to complete this form endfor suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patient and Trademark Office, U.S. Oppartment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DD NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.